



Republic of the Philippines
Department of Education
Provident Fund

Date Submitted:

Loan Application No.

Loan Amount:

Type of Loan: ☐ Multi-purpose
☐ New
☐ Renewal
☐ Additional

Term:

Purpose:
☐ Educational
☐ Hospitalization/Medical
☐ Long Medication/Rehabilitation
☐ House Arrears/Equity
☐ House Repair - Major
☐ House Repair - Minor
☐ Payment of Loans from Private institution
☐ Calamity
☐ Others (specify): _____

Borrower's Information	Co-Maker's Information
(Surname)(First Name)(Middle Name) Home Address: _____ Position: _____ Employee No.: _____ Employment Status: _____ Office/School&District: _____ Date of Birth: _____ Age: _____ Monthly Salary: PhP _____ Office tel. no. _____ Years in Service: _____ Mobile no. _____ E-mail address: _____ Specimen Signatures: _____	(Surname)(First Name)(Middle Name) Home Address: _____ Position: _____ Employee No.: _____ Employment Status: _____ Office/School&District: _____ Date of Birth: _____ Age: _____ Monthly Salary: PhP _____ Office tel. no. _____ Years in Service: _____ Mobile no. _____ Specimen Signatures: _____

LOAN AGREEMENT	
I hereby apply for a Provident Fund Loan in the amount of PESOS: _____ (P _____). In consideration of the grant thereof, I promise to pay all installments due based on the attached amortization schedule and bind myself with the terms and conditions of the loan as stipulated in the applicable guidelines of the DepEd Provident Fund. This document also serves as the Promissory Note upon approval of this loan. Accordingly, I hereby authorize the deductions of the monthly amortization from my salary. Should I be separated from the service, I also hereby agree to settle my outstanding loan balance before the date of my retirement/separation from the service, either through full payment in cash or through the execution of a notarized Promissory Note. Signature of Borrower over Printed Name Date	I hereby agree to assume all the outstanding obligations for the grant of this loan should the principal borrower be separated from the service, and either retirement or separation benefits due to him/her is not received or is insufficient to settle the borrower's outstanding loan, and upon proper notification by the Provident Fund Secretariat. Accordingly, I hereby authorize the monthly deduction from my salary of the amortizations for the outstanding obligation of the principal borrower until his/her loan is fully paid. Signature of Co-Maker over Printed Name Date

CERTIFICATE OF EMPLOYMENT AND CREDIBILITY	
Personnel Division/Unit: This is to certify that the above loan applicant/borrower: (1) is a ___permanent/___co-terminus employee of this Office and is not on leave of absence without pay; (2) has net pay of PhP _____ for the payroll month & year of _____; and (3) has given the true and correct information on the Loan Application Form. MARIA DIVINA H. CALLEJA Administrative Officer IV Signature over Printed Name Designation: _____ Date: _____	Legal Service/Unit: This is to certify that the above loan applicant/borrower has no pending administrative nor civil case charge against him/her based on records on file with DepEd. JINKY BATALLA-NOCOS Attorney III Signature over Printed Name Designation: _____ Date: _____

Authorization for Salary Deduction	
I hereby authorize the deduction of _____ PESOS (P _____) from my salary for _____ months, starting in _____, 20__ to _____, 20__ or until my total outstanding loan of _____ PESOS (P _____) has been fully paid. Amount deducted shall be credited to the account of the DepEd Provident Fund as receivables on the said loans. Employee No. _____ Status: _____ Division: _____ Code: _____ BORROWER's Signature over Printed Name Designation: _____	

SECRETARIAT’S ASSESSMENT/EVALUATION	
A. Documents Submitted:	
☐ 1 Loan Application Form (LAF) signed by HRMO&Legal ☐ 1 photocopy of the signed front page of Application Form ☐ 3 LATEST pay slip (ORIGINAL) ☐ 2 photocopies of the last payslip ☐ Photocopy of valid ID – Borrower and Co-maker ☐ Service Record/First Appointment (for FIRST TIME borrowers and Co-terminus employees only) ☐ Others (specify):	☐ Additional documents for Additional Loan/above 50k ☐ Letter request (2 copies) ☐ Hospitalization/Medical Expenses ☐ Medical Abstract/Certificate/Diagnosis ☐ Barangay/LGU certificate/resolution declaring the borrower’s place under state of calamity
B. Completeness and Veracity of Submitted Documents:	
☐ Signed and completely filled out LAF ☐ Complete supporting documents, for type of loan applied for ☐ Signatures on LAF are by authorized signatories	
C. Eligibility of the Borrower and Co-Maker	
☐ Borrower will not reach the mandatory age retirement on or before the maturity of his/her loan. ☐ Co-Maker will not reach the mandatory age retirement on or before the maturity of his/her loan. ☐ Borrower has Outstanding PF Loan Balance: ☐ Current Loan Balance Amount: PhP ☐ Past-Due Loans Amount: PhP ☐ No. of Years/Months Past-Due: Year/s: Month/s:	Age: Age:
☐ Borrower's Net Take-Home Pay after deduction of monthly amortization of the loan being applied for is equal to or higher than the required threshold for the current year. ☐ For renewal of loans: Borrower has paid at least 30% of the principal of the existing loan. Percentage of principal paid: %	
D. Computation of Loan:	
Principal Amount of Loan PHP Less: Outstanding Balance of Loan to be Renewed Principal PHP Interest Net Proceeds PHP	Net Take Home Pay after Deduction PHP Monthly Amortization PHP Period of Loan (mm/yy - mm/yy) Date Processed:
Processed by:	
MELISSA F. PARAFINA Senior Bookkeeper Signature over Printed Name (PF Secretariat)	Remarks:
Reviewed by:	
Signature over Printed Name (Head, PF Secretariat)	
ACTION TAKEN:	
Recommending Approval:	
☐ Approved ☐ Disapproved GINA A. VALENCIANO Administrative Officer V Head, PF Secretariat Signature over Printed Name Date:	NORMA B. SAMANTELA, CESO V Schools Division Superintendent Chairman, PF Secretariat Signature over Printed Name Date: